

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007459

FILED  
Mar 21, 2012  
Secretary of State

**Entity Name:** ROLLING THUNDER INC FL CHAPTER 3

**Current Principal Place of Business:**

7619 SW 50TH ROAD  
GAINESVILLE, FL 32608

**New Principal Place of Business:**

**Current Mailing Address:**

7619 SW 50TH ROAD  
GAINESVILLE, FL 32608

**New Mailing Address:**

**FEI Number:** 26-0061726

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LYNCH, THOMAS P  
7619 SW 50TH ROAD  
GAINESVILLE, FL 32608 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WEST, RANDY  
Address: 903 DREW LANE  
City-St-Zip: INTERLACHEN, FL 32148

Title: VP  
Name: OPEN, OPEN  
Address: OPEN  
City-St-Zip: OPEN, FL 32608

Title: T  
Name: LYNCH, THOMAS P  
Address: 7619 SW 50TH ROAD  
City-St-Zip: GAINESVILLE, FL 32608

Title: S  
Name: JOHNSON, PAULA  
Address: 5650 NE 150 AVENUE  
City-St-Zip: WILLISTON, FL 32696

Title: COB  
Name: WILCOX, FRED  
Address: 27038 NW 160TH PLACE  
City-St-Zip: HIGH SPRINGS, FL 32643

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: THOMAS P. LYNCH

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03/21/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date